PART B - FEE(S) TRANSMITTAL



Complete and send send is form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENC	E ADDRESS (Note: Use Block 1 for	any change of address)	Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
24998 75	590 01/12/2006			have its own certificat	il paper, such as an assignme e of mailing or transmission.	ent or formal drawing, must			
		SHINSKY L	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
					20 (0.0) 2.0 2000, 0.1	(Depositor's name)			
						(Signature)			
						(Date)			
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR	ATTORNEY DOCKET NO.	. CONFIRMATION NO.			
09/536,377	03/28/2000	·	Douglas Clark		M3653.0001/P001-C	4895			
TITLE OF INVENTION: N PREDICTIVE ABILITY AN					ASKS BASED ON USER D	EFINED CRITERIA AND			
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE PI	JBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE			
nonprovisional	NO	\$1400)	\$0	\$1400	04/12/2006			
EXAM	IINER	ART UN	IIT C	LASS-SUBCLASS]				
SMITH, JE	SMITH, JEFFREY A			705-009000	•				
1. Change of correspondence	e address or indication of "F	ee Address" (37	2. For printing on	the patent front page, li	st				
CFR 1.363).			(1) the names of	of up to 3 registered patent attorneys I <u>Dickstein Shapiro</u> ltematively,					
Address form PTO/SB/12	lence address (or Change of 22) attached.	Correspondence		membera Morin	& Oshinsky LLF				
"Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.	registered attorney 2 registered paten listed, no name wi	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME AND	RESIDENCE DATA TO E	E PRINTED ON	THE PATENT (print	or type)					
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified b 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will appear on t T a substitute for filin	he patent. If an assign g an assignment.	nee is identified below, the d	locument has been filed for			
(A) NAME OF ASSIGN	EE	(E	B) RESIDENCE: (CIT		2006 MBEYENE2 0000021 UNTRY)	1400.00 OP			
Metier Ltd.		Washingtor	82 FC:	01 FC:1591 02 FC:8001 DC					
	assignee category or catego	ories (will not be pr	***		orporation or other private gro	oup entity Government			
4a. The following fee(s) are			o. Payment of Fee(s):			<u>· · · · · · · · · · · · · · · · · · · </u>			
Issue Fee			A check in the ar	amount of the fee(s) is enclosed.					
	mall entity discount permitt	ed)		dit card. Form PTO-2038 is attached.					
Advance Order - # of	Copies 5		The Director is Deposit Account Nu	hereby authorized by comber 04-£073	harge the required fee(s), or (enclose an extra c	credit any overpayment, to opy of this form).			
5. Change in Entity Status	(from status indicated above	e)				., .,			
	MALL ENTITY status. See				LL ENTITY status. See 37 C				
The Director of the USPTO NOTE: The Issue Fee and Printerest as shown by the reco	is requested to apply the Iss ublication Fee (if required) ords of the United States Pat	ue Fee and Publica will not be accepte ent and Trademark	tion Fee (if any) or to d from anyone other t Office.	re-apply any previous han the applicant; a reg	ly paid issue fee to the application istered attorney or agent; or the	ation identified above. the assignee or other party in			
Authorized Signature	XY			Date April 10, 2006					
Typed or printed name _	John Grossma		Registration No32,699						
This collection of informatic an application. Confidential submitting the completed ap this form and/or suggestions Box 1450, Alexandria, Virginia 23312	on is required by 37 CFR 1 ity is governed by 35 U.S.C oplication form to the USPT is for reducing this burden, s inia 22313-1450. DO NOT	11. The information 122 and 37 CFR O. Time will vary hould be sent to the SEND FEES OR	on is required to obtain 1.14. This collection depending upon the e Chief Information COMPLETED FORM	n or retain a benefit by is estimated to take 12 individual case. Any c officer, U.S. Patent and IS TO THIS ADDRES	the public which is to file (an minutes to complete, includir omments on the amount of ti Trademark Office, U.S. Dep S. SEND TO: Commissioner	d by the USPTO to process) ag gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,			

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/17 (01-06)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paparage Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Fees pursuant to the Consolidat	ad Appropriatio	ns Act 2005 (U.D. 4818)	Complete if Known									
•			Application Num	Application Number 09/536,377-								
FEE TRA			Filing Date	N	March 28, 2000							
For	First Named Inv	entor [Douglas Clark									
			Examiner Name	J	J. A. Smith							
Applicant claims small	entity status. S	See 37 CFR 1.27	Art Unit	3	625							
TOTAL AMOUNT OF PAY	MENT ((\$) 1,415.00	Attorney Docket	Attorney Docket No. M3653.0001/P001-C								
METHOD OF PAYMENT (check all that apply)												
Check X Credit Card Money Order None Other (please identify):												
x Deposit Account Deposit Account Number: 04-1073 Deposit Account Name: Dickstein Shapiro Morin & Oshinsky LLP												
For the above-ident	ified deposit a	account, the Director i	s hereby authorize	ed to: (check	k all that apply)							
Charge fee(s)	indicated belo	ow	Charge	e fee(s) indi	icated below, ex	cept for th	ne filing fee					
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17												
FEE CALCULATION (A	ll the fees b	oelow are due upo	n filing or may	be subjec	ct to a surcha	rge.)						
1. BASIC FILING, SEARCH	I, AND EXAM	IINATION FEES										
			ARCH FEES	EXAMIN	ATION FEES							
Application Type	Fee (\$)	Small Entity Fee (\$) Fee (Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees F	Paid (\$)					
Utility	300	150 500	250	200	100							
Design	200	100 100	50	130	65							
Plant	200	100 300	150	160	80							
Reissue	300	150 500	250	600	300							
Provisional	200	100 0	0	0	0							
2. EXCESS CLAIM FEES							Small Entity					
Fee Description						Fee (\$)	Fee (\$)					
Each claim over 20 (includ		50	25									
Each independent claim over 3 (including Reissues)							100					
Multiple dependent claims						360	180					
Total Claims Extra	Claims F	ee (\$) Fee	Paid (\$)	Mu	ıltiple Depende	nt Claims						
9 - 20 =	×	=		<u>Fe</u>	<u>e (\$)</u> <u>F</u>	ee Paid (<u>5)</u>					
HP = highest numer of total clair	ns paid for, if gre	ater than 20.		-			_					
Indep. Claims Extra	Claims F	ee (\$) Fee	Paid (\$)									
3 =	× _	=										
HP = highest numer of independ	lent claims paid f	or, if greater than 3.					_					
3. APPLICATION SIZE FEI				. 11 61								
If the specification and dr listings under 37 CFR	awings exceed	d 100 sheets of paper	(excluding electr	onically illi for small en	ea sequence or a	computer Iditional 50	n					
sheets or fraction there	of. See 35 U	.S.C. 41(a)(1)(G) and	137 CFR 1.16(s).	or sman ch	inty) for each ac	aditional 5	·					
	xtra Sheets		additional 50 or frac	tion thereof	Fee (\$)	Fee	Paid (\$)					
- 100 =		/50	(round up to a who	ole number)	x =	=						
4. OTHER FEE(S)												
Non-English Specification, \$130 fee (no small entity discount)												
Other (e.g., late filing su		1,400.00										
8001 Printed copy of patent w/o color 15.00												
SUBMITTED BY		\sim										
Signature	4/1		Registration No. (Attorney/Agent)	32,699	Telephone	(202) 82	8-2279					
Name (Print/Type) Jon D. G	rossman				Date	April 10	, 2006					